POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			3/10/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
		5222	6-8-00

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
–	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim			Date				
Final	Original	9-13-9	6-19-02	10-1-02	11-20-02	3-3-03	12/12/03
	2					✔	✔
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	6			✔	✔	✔	
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	8			0	✔	✔	✔
	9				✔	✔	✔
	10				✔	✔	
	11				✔	✔	
	12						
	13				✔	✔	
	14		✔	✔	✔	✔	
15		✔	✔	=	=	✔	
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23		✔	✔	✔	✔	✔	
	24			0	✔	✔	
	25				✔	✔	
	26				✔	✔	
	27						
28				N			
	29		✔	✔	N		
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Claim		Date
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If more than 150 claims or 10 actions
staple additional sheet here

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